Robert S. Koppel 8300 Greensboro Dr. Suite 1200 Tysons, VA 22102

bkoppel@fcclaw.com (703) 584-8669 www.fcclaw.com

NOT ADMITTED IN VA



June 8, 2017

VIA ECFS

Marlene H. Dortch Secretary Federal Communications Commission 445 12th Street, S.W., Room TW-A306 Washington, D.C. 20554

Re: FCC Form 481 – Carrier Annual Report for Calendar Year 2016

Illinois Valley Cellular WC Docket No. 14-58

Dear Secretary Dortch:

Illinois Valley Cellular, on behalf of its three operating entities (1) Illinois Valley Cellular RSA 2-I (SAC 349008 in Illinois); (2) Illinois Valley Cellular RSA 2-II (SAC 349009 in Illinois); and (3) Illinois Valley Cellular RSA 2-III (SAC 249010 in Illinois), by its counsel, hereby submits a separate FCC Form 481 -- Carrier Annual Reporting Data Collection Form – for each of its three operating entities pursuant to Sections 54.313 and 54.422 of the Commission's Rules.

Each FCC Form 481 has been filed with the Universal Service Administrative Company ("USAC").

Please contact the undersigned if you have any questions.

Sincerely, Robert 5. Koppel

Robert S. Koppel

Attorney for:

Illinois Valley Cellular

Enclosures

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	349009	
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Michelle Owens	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	8157953200 ext.119	
<039>	Contact Email Address: Email of the person identified in data line <030>	mowens@ivcel.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Co	ode				349009						
<015>	Study Area Na	udy Area Name				ILLINOIS VA	ILLINOIS VALLEY CELLULAR RSA 2 - II					
<020>	Program Year	Program Year				2018	2018					
<030>	Contact Name	e - Person USA	should contac	ct regarding this	data	Michelle O	wens					
<035>	Contact Telep	hone Number	- Number of pe	erson identified	in data line <030	> 8157953200	ext.119					
<039>	Contact Email	Address - Ema	il Address of p	erson identified	in data line <030)> mowens@ivce	el.com					
<210>	For the prio	r calendar yea	ar, were there	e any reportal	ole voice servic	e outages?	No					
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>

<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures

	fulfilled Service Request lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	349009	
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com	
<300> U	nfulfilled service request (voice)	0	
<310> [Detail on attempts (voice)		
	Name Unfulfilled service request (broadband) Detail on attempts (broadband)	e of Attached Document	
~33U>		lame of Attached Document	

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	10> Study Area Code 349039						
<015>	15> Study Area Name ILLINOIS VALLEY CELLULAR 83A 2 - II						
<020>	20> Program Year						
<030>	30> Contact Name - Person USAC should contact regarding this data Michelle	Ovene					
<035>	Contact Telephone Number - Number of person identified in data line <030>	77953200 ext.119					
<039>	Contact Email Address - Email Address of person identified in data line model (030)	owens@ivoel.com					
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.	voice complaints (zero or greater) for voice telephony service in the prior Offered only fixed voice calendar year for each service area in which you are designated an ETC for					
<410>	0> Complaints per 1000 customers for fixed voice 0	.0					
<420>	0> Complaints per 1000 customers for mobile voice						
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.						
<440>	O> Complaints per 1000 customers for fixed broadband						
<450>	O> Complaints per 1000 customers for mobile broadband						

	npliance With Service Quality Standards and Consumer Protection Rules ection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<010>	Study Area Code	349009	
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020>	Program Year	201*	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com	
<500>	Certify compliance with applicable service quality standards and consumer pro	etection rules Yes	
		349009il510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	les Compliance	
<515> (Certify compliance with applicable minimum service standards	The state of the s	The state of the s

(600) Functionality i Data Collection Forn	n Emergency Situations 1		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
<010> Study Area C	ode	349009	
<015> Study Area N	lame	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020> Program Yea	r	2018	
<030> Contact Nam	e - Person USAC should contact regarding this data	Michelle Owens	
<035> Contact Tele	phone Number - Number of person identified in data line <030>	8157953200 esc.119	
<039> Contact Ema	il Address - Email Address of person identified in data line <030>	mowensDivcel.com	All

Yes

349009il610.pdf

<600> Certify compliance regarding ability to function in emergency situations

<610> Descriptive document for Functionality in Emergency Situations

	rice Offerings including Voice Rate Data Illection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	349009	
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens	
<035>	Contact Telephone Number - Number of person identified in data	line <030> 8157953200 ext.119	
<039>	Contact Email Address - Email Address of person identified in data	line <030> mowens@ivcel.com	
	Residential Local Service Charge Effective Date 1/1/2017 Single State-wide Residential Local Service Charge		

	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<bs></bs>	10
	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fe
L									
L									
L									
L									
-									
L									
-									
-					- See at	tached worksheet			
F					-				
-									
-									
1									
1				140000000000000000000000000000000000000					
L									
-			L .						
\vdash									
-									-
H									<u> </u>
-									
L						L			

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 3	49009
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com

	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<0	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached (select
-									

			-						
-									

	perating Companies Hection Form				FCC Form 481 OMB Control No. 306 July 2013	0-0986/OMB Control No. 3060-0819
<010>	Study Area Code		349009			
<015>	Study Area Name					
<020>	Program Year		2018	LEY CELLULAR RSA 2 -	1	
<030>		USAC should contact regarding this data	Michelle Owe			
<035>		nber - Number of person identified in data line <030>	8157953200 e			
<039>		Email Address of person identified in data line <030>	mowensSivcel	.com		
<810>	Reporting Carrier	Illinois Valley Cellular RSA 2-II				
<811>	Holding Company	Name Not Available				
<812>	Operating Company	Illinois Valley Cellular RSA 2-III				
<813>		<a1></a1>		<a2></a2>	<a3></a3>	
		Affiliates		SAC	Doing Business As Company of	Brand Designation
					7. T. F. T. F. T.	

					V.	
- 2						
1						
						The state of the s
-						
-						
-						
				1		

<015> 5			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<020> F	Study Area Code	349009	
	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<030> (Program Year	2018	
	Contact Name - Person USAC should contact regarding this data	Hichelle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119	
<039> (Contact Email Address - Email Address of person Identified in data line <030>	mowens@ivcel.com	
<900>	Does the filing entity offer tribal land services? (Y/N)	Мо	
<910> T	Tribal Land(s) on which ETC Serves		
<920> T	Fribal Government Engagement Obligation	Name of Attached Do	ocument
If your con	npany serves Tribal lands, please select (Yes, No, NA) for each these boxes		
	the status described on the attached PDF, on line 920,		
demonstra	ates coordination with the Tribal government pursuant to	Select	
)(9) includes:	Yes or No or Not Applicable	
	Needs assessment and deployment planning with a focus on Tribal community anchor institutions.	Тот Аррисане	
	easibility and sustainability planning;		
	Marketing services in a culturally sensitive manner;		
	Compliance with Rights of way processes		
	Compliance with Land Use permitting requirements		
	Compliance with Facilities Siting rules		
	Compliance with Environmental Review processes		
	Compliance with Cultural Preservation review processes		
	Compliance with Cutch at Preservation Teview processes		

(1000) V	pice and Broadband Service Rate Comparability			FCC Form 481	
Data Col	lection Form			OMB Control No. 3060-0986/OMB Con July 2013	ntrol No. 3060-0819
<010>	Study Area Code		349009		
<015>	Study Area Name		ILLINOIS VALLEY CELLULAR RSA 2 - II		
<020>	Program Year		2018		
<030>	Contact Name - Person USAC should contact regarding this data		Michelle Owens		
<035>	Contact Telephone Number - Number of person identified in data line <0	030>	8157953200 ext.119		
<039>	Contact Email Address - Email Address of person identified in data line <	030>	mowens@ivcel.com		
<1000>	Voice services rate comparability certification	Yes			
<1010>	Attach detailed description for voice services rate comparability compliance	34900	9il1010.pdf		
	•		Name of Attached Docume	nt	
<1020>	Broadband comparability certification				
<1030>	Attach detailed description for broadband comparability compliance				
	•		Name of Attached Docume	ent	

(1100) N	lo Terrestrial Backhaul Reporting	STANA S		FCC Form 481
	llection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	34900	9	
<015>	Study Area Name	ILLIN	OIS VALLEY CELLULAR RE	A 2 - II
<020>	Program Year	2018		
<030>	Contact Name - Person USAC should contact regarding this data	Miche	lle Owens	
<035>	Contact Telephone Number - Number of person identified in data line <030>	81579	53200 ext.119	
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowen	ssivcel.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)		Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps		

Lifeline	erms and Condition for Lifeline Customers lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	349009
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowene@ivcel.com
<1210> <1220>	Terms & Conditions of Voice Telephony Lifeline Plans Link to Public Website HTTP	Name of Attached Document
or the we	neck these boxes below to confirm that the attached document(s), on line 1210, bsite listed, on line 1220, contains the required information pursuant to (a)(2) annual reporting for ETCs receiving low-income support, carriers must eport:	
<1221>	Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222>	Details on the number of minutes provided as part of the plan,	
<1223>	Additional charges for toll calls, and rates for each such plan.	

(2005) Price Data Collect	Cap Carrier Additional Documentation ion Form			CC Form 481 DMB Control No. 3060-0986/OMB Control No. 3060-0819
Including Ra	te-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		J. Company of the Com	uly 2013
<010> St	udy Area Code	349009		
<015> St	udy Area Name	ILLINOIS VALLEY CELLULA	R RSA 2 - II	
<020> Pr	ogram Year	2018		
<030> Co	ontact Name - Person USAC should contact regarding this data	Michelle Owens		
	ontact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119		
<039> Co	ontact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com		
reductions	appropriate responses below (Yes, No, Not Applicable) to not , and Connect America Phase II support as set forth in 47 CFR : ntal Connect America Phase I reporting	e compliance as a recipie § 54.313(b),(c),(d),(e). Th	ent of Incremental High Cost support, Hi ne information reported on this form and	th Cost support to offset access charge in the documents attached below is accurate.
<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note July 2017 certification, this applies to Round 2 recipie Incremental Support.			
<2022>	Recipient certifies, representing year three after filing acceptance of funding pursuant to 54.312(c), that the question are not receiving support under the Broadb Program or the Broadband Technology Opportunities projects that will provide broadband with speeds of a Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients or	e locations in and Initiatives s Program for at least 4		
<2023>	The attachment on line 2024 includes a statement of capital funding expended in the previous year in mee America Phase I deployment obligations, accompanicensus blocks indicating where funding was spent. Tyear three - 54.313(b)(2)(ii). Round 2 recipients only.	the total amount of sting Connect ed by a list of his covers		
<2024A>	Round 2 Recipient of Incremental Support?			
<2024B>	Attach list of census blocks indicating where funding three - 54.313(b)(2)(ii). Round 2 recipients only.	was spent in year	Name of Attached Document Listi Required Information	ng
<2025A>				procedure and the second secon
<2025B>	Attach geocoded Information for Phase I milestone re year three) - Connect America Fund , WC Docket 10-9 Order, FCC 13-73, paragraph 35 (May 22, 2013).		Name of Attached Document Listi Required Information	ng
<2015>	2016 and future Frozen Support Certification 47 CFR	§ 54.313(c)(4)		

Data Collection F			060-0986/OMB Control No. 3060-0819
ncluding Rate-of-	Return Carriers affiliated with Price Cap Local Exchange Carriers	July 2013	
Price Cap	p Carrier Connect America ICC Support {47 CFR § 54.313(d)}		
<2016>	Certification support used to build broadband	L	
Connect	America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)		

(3005) Rate (Data Collecti	Of Return Carrier Additional Documentation				FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		240000		
<015>	Study Area Name		349009	- **** T EV (TT
<020>	Program Year		2018	3 VALLEY C	CELLULAR RSA 2 - II
				-	
<030>	Contact Name - Person USAC should contact regarding this d	iata	Michell	e Owens	
<035>	Contact Telephone Number - Number of person identified in	ı data line <030>	81579532	200 ext.11	.9
<039>	Contact Email Address - Email Address of person identified in	n data line <030>	mowens@	ivcel.co	m
financial re	m the drop down menu or check the boxes below to reporting requirements set forth in 47 CFR 54.313(f)(; below is accurate.				1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f){1}(i)}				
(3010B)	Please Provide Attachment	Name of Attache	ned Document Lis	sting Required	
(3012A)	Community Anchor Institutions {47 CFR §	IIII OTTING C.			
(3012B)	54.313(f)(1)(ii)} Please Provide Attachment	Name of Attach	ned Document Lis	icting Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR	Information (Yes/No)	0	O	
(3014)	§ 54.313(f)(2)} If yes, does your company file the RUS annual report	(Yes/No)	0	0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires: Electronic copy of their annual RUS reports		Ε	*	
(3016)	(Operating Report for Telecommunications Borrowers) Document(s) with Balance Sheet, Income Statement			$\overline{}$	
3010,	and Statement of Cash Flows				
3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attache Information	ed Document Lis	sting Required	
(3018)	If the response is no on line 3014, is your company audited?	(Yes/No	lo)	0	
(3019)	If the response is yes on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3020)	Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:				
3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3023)	Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows				£
3026)	Attach the worksheet listing required information	Name of Attache	ed Document Lis	sting Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)		FCC Form 481
Data Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	349009	
<015> Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Michelle Owens 8157953200 ext.119	
<035> Contact Telephone Number - Number of person identified in data line <030> <039> Contact Email Address - Email Address of person identified in data line <030>		
		CONTRACTOR STATE OF THE STATE O
Financial Data Summary (3027) Revenue (3028) Operating Expenses (3029) Net Income		
(3030) Telephone Plant In Service(TPIS)		
(3031) Total Assets		
(3032) Total Debt		
(3033) Total Equity		
(3034) Dividends		

(4005) Rural Broadband Experiment Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

Study Area Code	349009
Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
Program Year	2018
Contact Name - Person USAC should contact regarding this data	Michelle Owens
Contact Telephone Number - Number of person identified in data li	ine <030> 8157953200 ext.119
Contact Email Address - Email Address of person identified in data I	ine <030> mowens@ivgel.dom
	Study Area Name Program Year Contact Name - Person USAC should contact regarding this data Contact Telephone Number - Number of person identified in data li

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions - FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

must at least detail the pricing, offered broadband

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	4
4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials		

Name of Attached Document Listing Required Information

Certification - Reporting Carrier	FCC Form 481		
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
	10.7 2022		

<010>	Study Area Code	349009
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support reciplents; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: ILLINOIS VALLEY CELLULAR RSA 2 - II

Signature of Authorized Officer: CERTIFIED ONLINE

Date 06/06/2017

Printed name of Authorized Officer: Michelle Owens

Title or position of Authorized Officer: CFO

Telephone number of Authorized Officer: 8157953200 ext.119

Study Area Code of Reporting Carrier:

349009

Filing Due Date for this form: 07/03/2017

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

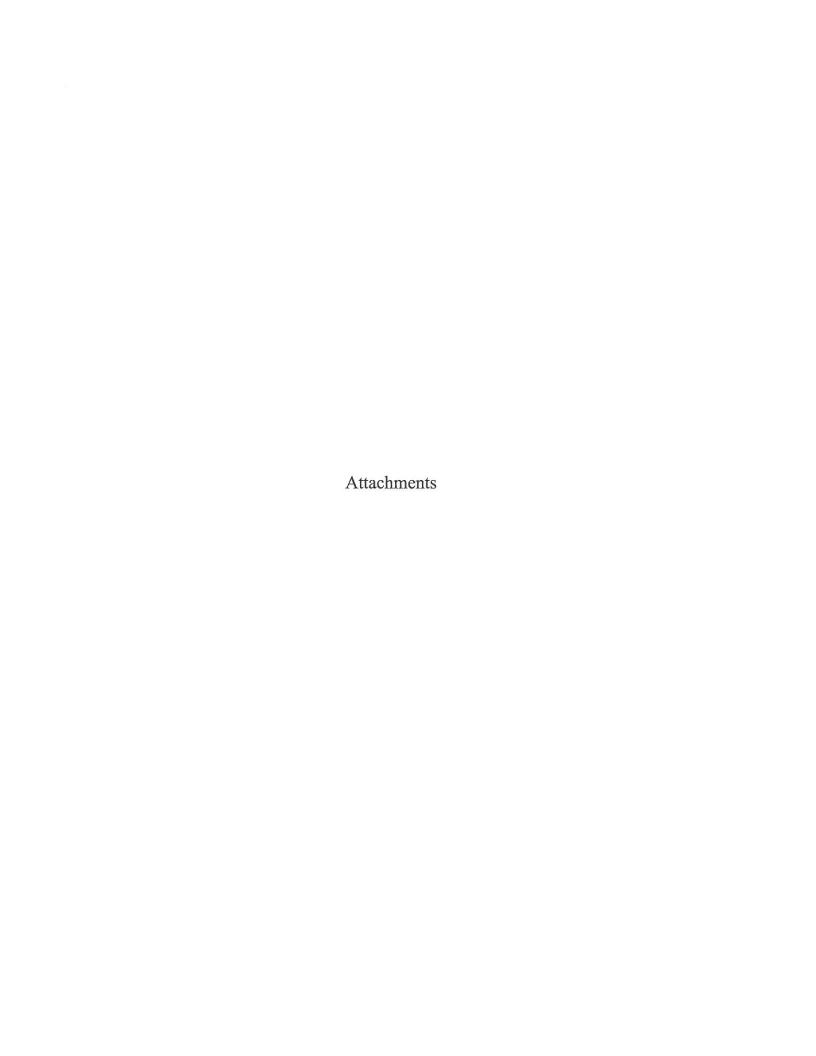
	tion - Agent / Carrier lection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	349009
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

I certify that (Name of Agent) also certify that I am an officer of the reporting carri agent; and, to the best of my knowledge, the reports	is authorized to submit the information reported on behalf of the reporting carrier. In my responsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized did data provided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
Persons willfully making false statements on this fo	an be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

Certification of Agent	Authorized to File Annual Reports for CAF or LI Rec	cipients on Behalf of Reporting Carrier
	horized to submit the annual reports for universal service sup reporting carrier; and, to the best of my knowledge, the info	oport recipients on behalf of the reporting carrier; I have provided remains a carrier.
Name of Reporting Carrier:		
Name of Authorized Agent Firm:		
Signature of Authorized Agent or Employee of Agent:		Date:
Name of Authorized Agent Employee:		
Title or position of Authorized Agent or Employee of Agent	t	
Telephone number of Authorized Agent or Employee of Ag	gent:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:	



(700) Price Offerings including Voice Rate Data

Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0986/OMB Control No. 3060-0819
July 2013

<010>	Study Area Code	349009
<015>	Study Area Name	ILLINOIS VALLEY CELLULAR RSA 2 - II
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Michelle Owens
<035>	Contact Telephone Number - Number of person identified in data line <030>	8157953200 ext.119
<039>	Contact Email Address - Email Address of person identified in data line <030>	mowens@ivcel.com

<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge 1/1/2017

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	< C>
State	Exchange (ILEC)	SAC (CETC)	Rate Type	Residential Local Service Rate	State Subscriber Line Charge	State Universal Service Fee	Mandatory Extended Area Service Charge	Total per line Rates and Fed
IL			FR	100.0	0.0	0.0	0.0	100.0
IL			FR	50.0	0.0	0.0	0.0	50.0
IL			FR	70.0	0.0	0.0	0.0	70.0
IL			FR	30.0	0.0	0.0	0.0	30.0
IL			FR	50.0	0.0	0.0	0.0	50.0
IL			FR	90.0	0.0	0.0	0.0	90.0
IL			FR	35.0	0.0	0.0	0.0	35.0
IL			FR	60.0	0.0	0.0	0.0	60.0
IL			FR	110.0	0.0	0.0	0.0	110.0
IL			FR	40.0	0.0	0.0	0.0	40.0
								T

Illinois Valley Cellular

<u>Line 510 – Compliance with Service Quality Standards and Consumer Protection</u>

Illinois Valley Cellular ("IVC") has reviewed the service quality and consumer protection practices which it follows in connection with its provision of voice and broadband services. IVC hereby certifies that it is in compliance with the CTIA–The Wireless Association® ("CTIA") Consumer Code for Wireless Service ("CTIA Code" or "Code") as currently in effect.

Illinois Valley Cellular

Line 610 - Functionality in Emergency Situations

Section 54.202(a)(2) of the Commission's Rules requires that each eligible telecommunications carrier ("ETC") must "[d]emonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations." Section 54.313(a)(6) requires ETCs to certify that they are "able to function in emergency situations as set forth in §54.202(a)(2)" in connection with their provision of voice and broadband services.

Illinois Valley Cellular ("IVC") herby certifies that it is able to function in emergency situations as set forth in Section 54.202(a) in connection with its provision of voice and broadband services.

For its central office, IVC has 8 hours of battery back-up as well as a natural gas back-up generator and the ability to deploy a diesel generator in the event of both electrical and natural gas failures. In addition, IVC has eight hours of battery back-up at all cell sites, generators at 12 sites, and the ability to deploy portable generators if necessary.

IVC has multiple trunk groups to different carriers, enabling it to re-route traffic around damaged facilities. In addition, IVC has extra capacity in its core network, and actively monitors traffic reports to determine if re-routing is required. IVC is also able to prioritize 911 and other emergency calls.

¹ 47 C.F.R. § 54.202(a).

² 47 C.F.R. § 54.313(a)(6).

These facilities and capabilities ensure that (1) a reasonable amount of back-up power will be available to ensure functionality without an external power source; (2) IVC will be able to reroute traffic around damaged facilities; and (3) IVC will be capable of managing spikes in traffic resulting from emergency situations.

Illinois Valley Cellular

<u>Line 1010 – Voice Services Rate Comparability</u>

Illinois Valley Cellular only provides mobile wireless service. It does not provide fixed voice service. Therefore, a description of fixed voice service rate comparability is not applicable.